



Functional surgery

Oral communications

CO02-001-e

Use of baclofen pump in the cerebral palsy of child: National survey of practice 2

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B. Dohin^d, B. Fernandez^e^a CHU HFME, Service Escale, Saint-Étienne, France^b CHU Bellevue, Saint-Étienne, France^c CHU Escale HFME, France^d Hôpital Nord, Saint-Étienne, France^e CHU, Hôpital Bellevue, Saint-Étienne, France**Keywords:** Spasticity; Intrathecal baclofen therapy; Cerebral palsy**Background.**– Aim of this study was to shed a light on the current use of intrathecal baclofen delivered by pump infusion in France for cerebral palsy in children in order to standardize practice in that specific indication.**Methods.**– We performed an observational study based on a standardized questionnaire sent to 29 pediatric PM&R services over the country. The questionnaire consisted in closed responses (yes or no).**Results.**– Twenty-four services responded to the questionnaire. Pre-test evaluation was performed in 22 cases and post-test evaluation in 21 cases, and early after implantation in 20 cases and late after implantation in 17 cases. Single shot infusion was the test favored by PM&R physicians in 15 cases. The pump was implanted in the subcutaneous tissue in 19 cases. Early complications were observed in 16 cases after pump implantation. Late complications were observed in 2 cases and consisted in catheter migration.**Conclusion.**– In conclusion, the current study demonstrated large practice diversity over the country and highlighted to potential for complications due to the treatment. The follow-up of the treated patients was also non-uniform. It should be of interest to develop nationwide standardized strategies in order to improve and make uniform patient management.<http://dx.doi.org/10.1016/j.rehab.2014.03.1394>

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Intrathecal baclofen therapy in adults in 2014

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^{*}Corresponding author.**Keywords:** Spasticity; Intrathecal baclofen therapy**Background.**– Intrathecal baclofen (ITB) therapy is a well-established treatment of generalised and severe spasticity. Thirty years after the first implantation of

an ITB pump, it is time to make a balance of current possibilities as well as look into challenges for the future.

Methods.– The scientific literature has been searched for ITB therapy in adults. Furthermore, the algorithm of the “European working group for spasticity in adults” and the activities of the “Ability network on the treatment of spasticity in spinal cord injury” will be explored.**Results.**– Whereas in the eighties most papers study safety and effectiveness of ITB, more recent articles deal with complications, catheter position, cost-effectiveness, functional outcome and timing of ITB or new indications.**Discussion/Conclusion.**– Although the effectiveness of ITB has been proven, many issues remain unclear. Therefore, further international collaboration on assessment and outcome is necessary in order to develop an evidence-based and widely applicable clinical pathway for indication, procedure and outcome measurement of ITB therapy.**Further reading**

Draulans N, Vermeersch K, Degraeuwe B, Meurrens T, Peers K, Nuttin B, et al. Intrathecal baclofen in multiple sclerosis and spinal cord injury: complications and long-term dosage evolution. Clin Rehabil 2013;27:1137–43.

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Intrathecal baclofen therapy for children with cerebral palsy (CP), especially the ambulatory and dystonic children

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**Keywords:** Spasticity; Intrathecal baclofen therapy; Cerebral palsy**Background.**– Intrathecal baclofen therapy for children with severe spasticity (Gross Motor Function Classification System IV-) is a successful therapy. However, in children with GMFCS I-III and dystonia patients, this therapy is not so evident.**Method.**– I'd like to elucidate our screening and follow-up methods based on the experience of a multidisciplinary team approach at the University Hospital Pellenberg on a large group of CP children.**Results.**– It is important to assess the patients whole clinical presentation of spasticity and spasticity-related problems, to make short-term and long-term treatment goals. Re-assessment of treatment goals is necessary.**Conclusion.**– Intrathecal baclofen therapy is not a solo therapy. How we can evaluate this therapy then?**Further reading**

Dan B, Motta F, Vles J, Vloeberghs M, Becher J, Eunson P, et al. Consensus on the appropriate use of intrathecal baclofen therapy in paediatric spasticity. Eur J Paediatr Neurol 2010;14:19–28.

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